

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 7000051377 Carrington Mortgage Services LLC PO BOX 79001 Phoenix, AZ 85062		Mortgage VALUE \$ 60,000.00				50,923.95	
ACCOUNT NO.		 VALUE \$					
ACCOUNT NO.		 VALUE \$					
ACCOUNT NO.		 VALUE \$					
Subtotal (Total of this page)						\$ 50,923.95	
Total (Use only on last page)						\$ 50,923.95	

0 continuation sheets attached

(Report also on
Summary of
Schedules.)

(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☒ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

Debtor(s)

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Domestic Support Obligations

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. Nicole Blair 6362 Dean St Taylor, MI 48174		Child Support				unknown		
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
Subtotal (Totals of this page)						\$	\$	\$
Total (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)						\$		
Total (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							\$	\$

IN RE **Radloff, Tolson Robert**Case No. **2:13-bk-55227**

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 042047GC Cavalry Portfolio PO BOX 27288 Tempe, AZ 85285		Collections				6,374.00
ACCOUNT NO. ComcaST PO BOX 3005 Southeastern, PA 19398		Collections				137.20
ACCOUNT NO. Dennis John Woods 2479 Astoria Blvd Canton, MI 48188		Collections				4,792.56
ACCOUNT NO. DTE Energy PO BOX 740786 Cincinnati, OH 45274		Collections				118.00

1 continuation sheets attached

Subtotal
(Total of this page) \$ **11,421.76**

Total
(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules and, if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

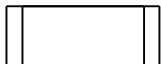
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Gibraltar Trade Center 15525 Racho Rd Taylor, MI 48180		Collections				unknown
ACCOUNT NO. Giuseppe Leone 26062 Eureka Rd Taylor, MI 48180		Personal Loan				4,150.00
ACCOUNT NO. Maureen Feeney 1055 W Hollywood Ave #1B Chicago, IL 60660		Collections				unknown
ACCOUNT NO. Michael Stillman 7091 Orchard Lake Rd Suite 270 West Bloomfield, MI 48322						0.00
ACCOUNT NO. 898329927 Nextel PO BOX 3427 Bloomington, IL 61702		Collections				260.81
ACCOUNT NO. Oakwood Healthcare PO BOX 674576 Detroit, MI 48267		Collections				1,080.00
ACCOUNT NO. 105788GC Portfolio Recovery Associates Dept 922 PO BOX 4111 Concord, CA 94524		Collections				2,000.00

Sheet no. 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **7,490.81**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)

Total
\$ **18,912.57**



UNITED STATES BANKRUPTCY COURT
Eastern District of Michigan

COVER SHEET FOR AMENDMENTS

CASE NAME: TOLSON ROBERT RADLOFF

CASE NUMBER: 13-55227

The enclosed documents amend the petition, schedule, statement of financial affairs, statement of income and expenses, matrix or summary of assets and liabilities.

The purpose of this amendment is to:

☐ Add creditors to schedules(s). How many? ____
(Use second page of this form to list creditors added).

☒ \$30.00 Amendment Fee. This fee is required whenever you add creditors to a case, delete creditors, change the amount of a debt or change the classification of a debt. The fee is not required when correcting addresses of previously listed creditors. It is not required when new schedules are filed in a converted case.

☐ Correct the addresses of creditors already listed on the schedules and matrix previously filed. (Use second page of this form).

☒ Other: (Provide detail of amendment) Amended Schedules D, E, F, and the Creditor Matrix to reflect the addition of creditors

☐ Amend Schedules and list of creditors. Schedules must be verified by the debtor(s).

☐ Amend Matrix. Please do not send a matrix adding creditors to a case unless you also send the amended schedules. Do not send a new matrix to correct an address. Use the second page of this form. Pursuant to L.B.R. 1007-2 & 1009-1 an amendment to a matrix filed by a debtor without an attorney must have a complete paper copy attached to this form. Electronic filers must upload creditors to the ECF system.

NOTE: LBR 1009-1(b) requires the debtor to serve a copy of the amendment and the cover sheet for amendments on the trustee and all other entities affected by the amendment.

CORRECTIONS AND ADDITIONS TO MAILING MATRIX

Use this section of the form to make corrections to the names and address of any creditors or parties in interest who are listed on the current matrix of the case.

NAME OF CREDITOR (As it now appears and address):

NAME
OF CREDITOR (As it now appears and address):

NAME
OF CREDITOR (As it now appears and address):

Use this section of the form to IDENTIFY creditors added to the schedules and matrix

34th District Court
11131 Wayne Rd
Romulus, MI 48174

AFNI
PO BOX 3097
Bloomington, IL 61702

Alliance One
PO BOX 3107
Southeastern, PA 19398

Berman And Rabin
15280 Metcalf Ave
Overland Park, KS 66223

Capital One Bank
PO BOX 60599
City Of Industry, CA 91716

Carrington Mortgage Services LLC
PO BOX 79001
Phoenix, AZ 85062

Cavalry Portfolio
PO BOX 27288
Tempe, AZ 85285

ComcaST
PO BOX 3005
Southeastern, PA 19398

Credit Protection Association
13355 Noel Rd
Dallas, TX 75240

Dennis John Woods
2479 Astoria Blvd
Canton, MI 48188

DTE Energy
PO BOX 740786
Cincinnati, OH 45274

Gibraltar Trade Center
15525 Racho Rd
Taylor, MI 48180

Giuseppe Leone
26062 Eureka Rd
Taylor, MI 48180

Marshall Stillman
7091 Orchard Lake Rd Ste 270
West Bloomfield, MI 48322

Mary Jane Elliott
42300 Karim Blvd
Novi, MI 48375

Maureen Feeney
1055 W Hollywood Ave #1B
Chicago, IL 60660

Michael Stillman
7091 Orchard Lake Rd Suite 270
West Bloomfield, MI 48322

Mitchell Bluhm And Associates
2222 Texoma Pkwy Suite 160
Sherman, TX 75090

NAtional City Bank
4100 W 150th St
Cleveland, OH 44135

Nextel
PO BOX 3427
Bloomington, IL 61702

Nicole Blair
6362 Dean St
Taylor, MI 48174

Oakwood Healthcare
PO BOX 674576
Detroit, MI 48267

PNC BANK
4100 W 150th St
Cleveland, OH 44135

Portfolio Recovery Associates
Dept 922
PO BOX 4111
Concord, CA 94524

Premium Asset Recovery Corp
PO BOX 1810
Warren, MI 48090

Third Party Withholding Unit
Michigan Dept Of Treasury
PO BOX 30785
Lansing, MI 48909

Tri County Court Services Inc
323 N Clinton Ave
St. Johns, MI 48879

.FOR ADDITIONAL CHANGES COPY THIS SHEET AND CONTINUE

Signature: /s/ Mohamed Zaher

Name of Attorney (Mohamed Zaher)
18551 W. Warren Ave
Detroit MI. 48228
(313) 982-0010
zaherlaw@yahoo.com

I/We do hereby affirm under penalty of perjury that I/we have read the foregoing form, Cover Sheet for Amendments, and all pleadings and attachments thereto, and do hereby affirm that the information contained herein is true and accurate to the best of my knowledge, information and belief.

Signature: /s/ TOLSON ROBERT RADLOFF

TOLSON ROBERT RADLOFF (Debtor)

UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

IN RE

TOLSON ROBERT RADLOFF

Debtor

Case No. 13-55227

Hon. Judge Tucker

Chapter 7

CERTIFICATE OF SERVICE

I, Fatima Beydoun, hereby certify that on August 29, 2013, a Cover Sheet for Amendments regarding Schedules D, E, F, and the creditor matrix was served through transmission via the Court's CM/ECF system on:

All Creditors on the Matrix

Trustee

Basil T. Simon

645 Griswold

Suite 3466

Detroit, MI 48226

Respectfully Submitted,

/s/Fatima Beydoun

Fatima Beydoun

18551 W Warren

Detroit, MI 48228

Dated: August 29, 2013